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UTILITY PATENT APPLICATION TRANSMITTAL

Attorr	ney Docket No.	650053.91673				
		Quinn H. Hogan				
Title Transcutaneous Electrical Nerve Locator						
	on Mail Label N	161 879 736 US				

(Only for new nonprovisional applications under 37 CFR 1.53(b)) Express Mail Label No. 101879736 US Commissioner for Patents **APPLICATION ELEMENTS** ADDRESS TO: P.O. Box 1450 See MPEP chapter 600 concerning utility patent application contents. Alexandria, VA 22313-1450 Fee Transmittal Form (e.g., PTO/SB/17) CD-ROM or CD-R in duplicate, large table or (Submit an original and a duplicate for fee processing) Computer Program (Appendix) Applicant claims small entity status. 8. Nucleotide and/or Amino Acid Sequence Submission See 37 CFR 1.27. (if applicable, all necessary) S [Total Pages | 9 3. [Specification Computer Readable Form (CRF) (preferred arrangement set forth below) - Descriptive title of the invention b. Specification Sequence Listing on: - Cross Reference to Related Applications i. CD-ROM or CD-R (2 copies); or Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix Statements verifying identity of above copies - Background of the Invention - Brief Summary of the Invention ACCOMPANYING APPLICATION PARTS - Brief Description of the Drawings (if filed) - Detailed Description 9. Assignment Papers (cover sheet & document(s)) - Claim(s) 37 CFR 3.73(b) Statement Power of - Abstract of the Disclosure (when there is an assignee) Attorney 4. English Translation Document (if applicable) Drawing(s) (35 U.S.C. 113) [Total Sheets 1 Copies of IDS Information Disclosure 12. 5. Oath or Declaration [Total Pages Citations Statement (IDS)/PTO-1449 Newly executed (original or copy) Copy from a prior application (37 CFR 1.63 (d)) 13. Preliminary Amendment a. Return Receipt Postcard (MPEP 503) 14. 1 (for continuation/divisional with Box 18 completed) (Should be specifically itemized) **DELETION OF INVENTOR(S)** Certified Copy of Priority Document(s) (if foreign priority is claimed) 15 Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR Nonpublication Request under 35 U.S.C. 122 16. 1.63(d)(2) and 1.33(b). (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. Application Data Sheet. See 37 CFR 1.76 17. Other: Unsigned Declaration 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76: Continuation Continuation-in-part (CIP) of prior application No.:_ Prior application information: Art Unit: For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS ~ Customer Number 26710 V Correspondence address below Name Barry E. Sammons Quarles & Brady, LLP 411 East Wisconsin Avenue Address City Milwaukee State WI Zip Code 53202 USA Country Telephone 414.277.5705 Fax 414.271.3552 Name (Print/Type) Barry E. Sammons 25,608 Registration No. (Attorney/Agent) Signature 12-09-2003 Date

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PTO/SB/17 (10-03)

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FEE TRANSMITTAL for FY 2004

(\$) 770.00

Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

Compl te if Known					
Application Number					
Filing Date	12-09-2003				
First Named Inventor	Quinn H. Hogan				
Examiner Name					
Art Unit					
Attorney Docket No.	650053.91673				

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)					
Check Credit card Money Other None	3. AI	DDITI	ONAI	FEE		
Deposit Account:	Large Entity Small Entity					
Deposit Account 17-0055	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
Number	1051	130	2051	65	Surcharge - late filing fee or oath	
Deposit Account Name	1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
The Director is authorized to: (check all that apply)	1053	130	1053		Non-English specification	
Charge fee(s) indicated below Credit any overpayments	1812	2,520	1812	2,520	For filing a request for ex parte reexamination	
Charge any additional fee(s) or any underpayment of fee(s)	1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.	1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
FEE CALCULATION	1251	110	2251	55	Extension for reply within first month	
1. BASIC FILING FEE	1252	420	2252	210	Extension for reply within second month	
Large Entity Small Entity	1253	950	2253	475	Extension for reply within third month	
Fee Fee Fee Fee Fee Fee Paid Code (\$) Code (\$)	1254	1,480	2254	740	Extension for reply within fourth month	
1001 770 2001 385 Hillity filling for	1255	2,010	2255	1,005	Extension for reply within fifth month	
1002 340 2002 170 Design filing fee	1401	330	2401	165	Notice of Appeal	
1003 530 2003 265 Plant filing fee	1402	330	2402	165	Filing a brief in support of an appeal	
1004 770 2004 385 Reissue filing fee	1403	290	2403	145	Request for oral hearing	
1005 160 2005 80 Provisional filing fee	1451	1,510	1451	1,510	Petition to institute a public use proceeding	
SUBTOTAL (1) (\$) 770.00	1452	110	2452	55	Petition to revive - unavoidable	
	1453	1,330	2453	665	Petition to revive - unintentional	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501	1,330	2501	665	Utility issue fee (or reissue)	
Extra Claims below Fee Paid Total Claims 9 -20* = 0 x 18.00 = 0.00	1502	480	2502	240	Design issue fee	
	1503	640	2503	320	Plant issue fee	
Independent 3 -3** = 0 x 86.00 = 0.00 Multiple Dependent	1460	130	1460	130	Petitions to the Commissioner	
	1807	50	1807	7 50	Processing fee under 37 CFR 1.17(q)	
Large Entity Small Entity Fee Fee Fee Fee Fee Description	1806	180	1806		Submission of Information Disclosure Stmt	
Code (\$)	.8021	40	8021	1 40	Recording each patent assignment per property (times number of properties)	
1201 86 2201 43 Independent claims in excess of 3	1809	770	2809	385	Filing a submission after final rejection (37 CFR 1.129(a))	
1203 290 2203 145 Multiple dependent claim, if not paid	1810	770	2810	385	For each additional invention to be	
1204 86 2204 43 ** Reissue independent claims over original patent	1801	770	2801	385	examined (37 CFR 1.129(b)) Request for Continued Examination (RCE)	
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1802	900	1802		Request for expedited examination of a design application	
Other fee (specify)						
SUBTOTAL (2) ((\$) 0.00 **or number previously paid, if greater; For Reissues, see above	*Redu	ced by	Basic I	Filing F	ee Paid SUBTOTAL (3) (\$) 0.00	

SUBMITTED BY				(Complete (if applicable))			
Name (Print/Type)	Barry E. Sammons	Registration No. (Attorney/Agent) 2	5,608	Telephone 414.277.5705			
Signature	Born P. Sam	MAN	•	Date	December 9, 2003		

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This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.